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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/800580	
	Filing Date	03/15/2004	
	First Named Inventor	Kenji Inoue	
	Art Unit	1771	
	Examiner Name	E. Cole	
Total Number of Pages in This Submission	13	Attorney Docket Number	KIN99USA

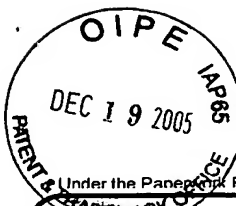
ENCLOSURES (Check all that apply)		
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Firm Name	HOWSON AND HOWSON		
Signature	<i>George A. Smith, Jr.</i>		
Printed name	George A. Smith, Jr.		
Date	December 15, 2005	Reg. No.	24,442

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$130; \$120; \$180

Complete if Known

Application Number	10/800580
Filing Date	03/15/2004
First Named Inventor	Kenji Inoue
Examiner Name	E. Cole
Art Unit	1771
Attorney Docket No.	KIN99USA

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 08-3040 Deposit Account Name: Howson and Howson

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)**Small Entity Fee (\$)**

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

360

180

Total Claims**Extra Claims****Fee (\$)****Fee Paid (\$)****Multiple Dependent Claims****Fee (\$)****Fee Paid (\$)**

- 20 or HP =

x

=

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims**Extra Claims****Fee (\$)****Fee Paid (\$)**

- 3 or HP =

x

=

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets**Extra Sheets****Number of each additional 50 or fraction thereof****Fee (\$)****Fee Paid (\$)**

- 100 =

/ 50 =

(round up to a whole number) x

=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Extension of Time \$120; \$130 Terminal Disclaimer; IDS \$180

\$430

SUBMITTED BY

Signature	Registration No. 24,442 (Attorney/Agent)	Telephone 215-540-9200
Name (Print/Type) George A. Smith, Jr.		Date December 15, 2005

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